

REGISTRATION OF STORAGE TANKS

In accordance with Sections 303 and 503 of the Storage Tank and Spill Prevention Act, owners of regulated storage tanks are required to register their tanks with the Department and pay the required fees.

*** PLEASE READ ALL INSTRUCTIONS THOROUGHLY BEFORE COMPLETING THE FORM ***

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REASON OF SUBMITTAL (Please Check Those That Apply)

INITIAL REGISTRATION

- ☐ Initial Registration
- ☐ Registration for Removal of Unregistered Tank(s)
- ☐ Registration for Un-Registered Tank(s) Closed in Place

AMENDED REGISTRATION

- ☐ Change in Previous Info
- ☐ Adding Tank(s)
- ☐ Temporarily Not Using Tank(s)
- ☒ Removed / Closed Tanks
- ☐ Relocated Tank(s) (Same Owner-Different Facility)

CHANGE OF OWNERSHIP

- ☐ Sold - Purchased
- ☐ All Tanks Will Remain at Same Facility
- ☐ Some Tanks Will Remain at Same Facility
- ☐ Some Tanks Relocated to Another Regulated Facility
- ☐ Some Tanks Relocated to a New Facility and the Tanks are to Be Registered

ENVIRONMENTAL CLEANUP

STATE USE ONLY
DO NOT WRITE IN THIS SPACE

II. OWNER / BUSINESS INFORMATION (Please Type or Print Legibly)

A. DER CLIENT ID NO. (STATE USE ONLY) _____

Federal Tax ID No.,

EIN (or SS) No. 2 3 1 4 8 0 5 4 8

Owner Name High Associates, Ltd.

Address 1853 William Penn Way

P.O. Box 10008

City Lancaster State PA Zip 17605-0008

County Lancaster Municipality E. Hempfield

Phone No. (717) 291 2284

Type of Owner/Business (Check Only One)

- ☐ Vol. Fire Co./EMS Org.
- ☒ Corporate
- ☐ Federal Government
- ☐ Private (Business)
- ☐ State Government
- ☐ Private (Residential)
- ☐ Local Government

B. CHANGE OF OWNERSHIP

(Complete - Only if some or all tanks have been sold or purchased.)

Date of Sale/Purchase _____

Sold To _____

(New Owner Name) _____

(New Address) _____

Purchased From _____

(Old Owner Name) _____

(Old Address) _____

(Old Facility ID No.) _____

(Old Tank No.(s)) _____

III. FACILITY INFORMATION (Please Type or Print Legibly)

A. DER FACILITY ID NO. 3 6 - 6 0 9 5 0

Facility Name ISC Technologies

Location (PO Box NOT acceptable) (RR Box IS acceptable)

3050 Hempland Road

City Lancaster State PA Zip 17603

County Lancaster Municipality E. Hempfield

Phone No. (717) 291 2284

Type of Facility (Check Only One)

- ☐ 00 Unknown
- ☐ 01 Gas Station
- ☐ 02 Petroleum Distr
- ☐ 03 Air Taxi
- ☐ 04 Aircraft Owner
- ☐ 05 Auto Dealership
- ☐ 06 Railroad
- ☐ 07 Local Govt
- ☐ 08 State Govt
- ☐ 09 Federal, Non-Military
- ☐ 10 Federal, Military
- ☒ 11 Commercial
- ☐ 12 Industrial
- ☐ 13 Residential
- ☐ 14 Contractor
- ☐ 15 Trucking/Transport
- ☐ 16 Utilities
- ☐ 17 Farm
- ☐ 99 Other SPECIFY _____

B. CONTACT (Optional)

(Complete - Only if mail is to be sent to someone other than the owner or if mail is to be sent to a specific person or department within a company.)

☐ Send all mail to Facility address noted to the left.

☐ Send all mail to Contact address noted below:

Name _____

Title _____

Mailing Address _____

City _____ State _____ Zip _____

Phone No. () _____

Detach and return this page to the Division of Storage Tanks

IV. DESCRIPTION OF STORAGE TANKS (Please type or print legibly each regulated storage tank at this facility under your owners.

A. ABOVEGROUND TANKS List ALL tanks. If amending information, mark the Amended Tank(s) with an asterisk (*) to the left of the tank number.

Tank Number	STATUS	Install Date (Mo-Day-Yr)	Remove Date (Mo-Day-Yr)	Capacity (Gallons)	Substance Code (Currently or Last Stored)	CERCLA Name and CAS No. (If Hazardous Substance)	Substance Name (If Other or Mixture)	Tank Ex	
								✓ If Yes	C
A									
A									
A									
A									
A									
A									
A									
A									
A									
A									
A									
A									

Status Codes: C - Currently in Use; T - Temporarily Out of Use; R - Removed or Closed in Place

B. UNDERGROUND TANKS List ALL tanks. If amending information, mark the Amended Tank(s) with an asterisk (*) to the left of the tank number.

Tank Number	STATUS	Install Date (Mo-Day-Yr)	Remove Date (Mo-Day-Yr)	Capacity (Gallons)	Substance Code (Currently or Last Stored)	CERCLA Name and CAS No. (If Hazardous Substance)	Substance Name (If Other or Mixture)	Tank Ex	
								✓ If Yes	C
001	R	12-72	10-27	10,000					

Status Codes: C - Currently in Use; T - Temporarily Out of Use; R - Removed or Closed in Place

V. CERTIFICATION (Read and Sign after completing all appropriate sections.)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. This registration is conditioned upon compliance with provisions of the Storage Tank and Spill Prevention Act, with any regulations and orders issued pursuant to this Act, and with the requirements for obtaining a permit required under this Act.

Please be advised that signature by an individual on this document indicates that he/she owns the subject storage tank and, in effect, represents to the Department that the individual owns the storage tank and is aware of those responsibilities and potential liabilities as an "owner" arising under the Storage Tank and Spill Prevention Act and its regulations. Please be further advised that this registration is made subject to the penalties of 18 P.S. Section 4904 relating to unsworn falsification to authorities.

Name and Official Title of Owner Gerald C. Stroud, Property Services Manager	Signature <i>Gerald C. Stroud</i>	Date Signed 10-31-84
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Detach and return this page to the Division of Storage Tanks

INSTRUCTIONS

Please type or print in ink all items except "Signature" in Section V. This form is to be completed for each FACILITY which has regulated storage tanks. If there are more than 10 underground or aboveground tanks, photocopy the reverse side of this form, and staple continuation sheets to this form.

Section I. Owner Information - Name, business mailing address and phone number of OWNER of the storage tank(s) at the facility. Please include county and Federal Identification Number, if none include your Social Security Number.

Section II. Type of Owner - Mark the appropriate box.

Section III. Facility Information - Name and physical location (not P.O. Box) of FACILITY. Please include county and township in which FACILITY is located. Include the Facility Identification No. if known.

Section IV. Type of Facility - Mark the appropriate box, if applicable.

Section V. Description of Storage Tanks - This section is for recording information about each regulated storage tank at the facility. Information for aboveground tanks is to be recorded in Part A. Information for underground tanks is to be recorded in Part B.

1. Tank Registration Number - The registration numbers to be recorded for underground tanks are "001", "002", "003", etc. The registration numbers to be recorded for aboveground tanks are "001A", "002A", "003A", etc. The "A" has already been printed on the form for your convenience.

2. Status - Indicate whether the tank is currently in use, temporarily out of use, or permanently out of use. Permanently out of use means properly closed in place with an inert solid material. Do not include tanks which have been removed.

3. Date of Installation - Specify the month and year the tank was completely installed. For instance, "0190", for January, 1990. If unknown, write "0000".

4. Capacity - Specify the total design or maximum capacity of the tank in GALLONS. If unknown, write "unknown".

5. Substance Currently or Last Stored - Indicate the substance(s), currently or last stored. If a hazardous substance, please indicate CERCLA Name and CAS Number. If Other is indicated, please specify.

6. Tank Has Been Issued Fire Safety Approval or Permit - Indicate whether the tank has been approved or permitted by the Pennsylvania State Police, Fire Marshal Division; or local agency under their jurisdiction for fire safety.

7. Registration Fee - Determine registration fee due PER TANK as indicated below. A registration fee is NOT required for tanks permanently out of use.

A. Aboveground tanks

1. Up to and including 5,000 gallons - \$50 per tank

2. 5,001 to and including 50,000 gallons - \$125 per tank

3. Greater than 50,000 gallons - \$300 per tank

B. Underground Tanks - \$50 per tank

Record the total registration fee due for all aboveground tanks in the space provided (A). Record the total registration fee due for all underground tanks in the space provided (B). Record the total registration fee due for all aboveground and underground tanks in the space provided (A + B). Submit a check or money order, for the total registration fee due, made payable to: Dept. of Environmental Resources.

Section VI. Certification - This section is to be completed by the OWNER. Please type or print the name and official title of the OWNER. The OWNER must also sign and record the date the application was examined.

Section VII. Nameplate Information - Complete this section for each aboveground tank greater than 5,000 gallon capacity. Use the same Tank Registration Number as identified in Section VI.

PLEASE SEND COMPLETED ORIGINAL FORM AND CHECK TO:

PA Department of Environmental Resources

Bureau of Water Quality Management

Registration of Storage Tanks

(and the appropriate address below, depending on where your FACILITY is located)

1875 New Hope Street
Norristown, PA 19401

90 East Union Street -
2nd Floor
Wilkes-Barre, PA 18701

One Ararat Blvd.
Harrisburg, PA 17110

200 Pine Street
Williamsport, PA 17701

Highland Bldg. - 6th Floor
121 South Highland Mall
Pittsburgh, PA 15206

1012 Water Street
Meadville, PA 16335

Counties
Berks, Bucks, Chester, Delaware,
Lehigh, Montgomery, Northampton,
Philadelphia,

Counties
Carbon, Lackawanna, Luzerne,
Monroe, Pike, Schuylkill,
Susquehanna, Wayne, Wyoming,

Counties
Adams, Bedford, Blair, Cumberland,
Dauphin, Franklin, Fulton,
Huntingdon, Juniata, Lancaster,
Lebanon, Mifflin, Perry, York

Counties
Bradford, Cameron, Centre, Clinton,
Clearfield, Columbia, Lycoming,
Montour, Northumberland, Potter,
Snyder, Sullivan, Tioga, Union

Counties
Allegheny, Armstrong, Beaver,
Cambria, Fayette, Greene, Indiana,
Somerset, Washington,
Westmoreland

Counties
Butler, Clarion, Crawford, Elk, Erie,
Forest, Jefferson, Lawrence,
McKean, Mercer, Venango, Warren

I. OWNER INFORMATION

Owner Name High Associates, Ltd.

Tax Identification No. 23-1480548

Mailing Address 1853 William Penn Way

P.O. Box 10008

City Lancaster State PA Zip 17605-

County Lancaster Phone No. (717) 291-2284

II. TYPE OF OWNER (Mark only one)

☐ Federal Government

☒ Corporate

☐ State Government

☐ Private

☐ Local Government

III. FACILITY INFORMATION

Facility Name ISC Technologies

Facility Identification No. 36 60950

Street Address (P.O. Box not acceptable)

3050 Hempland Road

City Lancaster State PA Zip 1760

County Lancaster Township East Hempfield

IV. TYPE OF FACILITY (Mark only one, if applicable)

☐ Farm

☐ Municipal

☐ Residential

V. DISCUSSION

A. ABOVEGROUND TANKS

[illegible]

B. UNDERGROUND TANKS

[illegible]

KEY FOR COMPLETION OF SECTION V.

Status

C Currently in Use
T Temporarily Out of Use
P Permanently Out of Use

Substance Currently or Last Stored

A	Gasoline	G	Used Motor Oil
B	Diesel	H	Aviation
C	Gasohol	I	Hazardous Substance
D	Kerosene	J	Other
E	Heating Oil	K	Unknown
F	New Motor Oil	L	Mixture

Fire Safety Permit

Y Yes
N No


VI. CERTIFICATION (Read and Sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. This registration is conditioned upon compliance with provisions of the Storage Tank and Spill Prevention Act, with any regulations and orders issued pursuant to this Act, and with the requirements for obtaining a permit required under this Act.

Name and Official Title of Owner

Name and Official Title of Owner
Gary C. Stroud
Property Services Manager

Signature

Signature 

Date Signed _____

2-1-90

REGISTRATION OF STORAGE TANKS

IN ACCORDANCE WITH SECTIONS 303 AND 503 OF THE STORAGE TANK AND SPILL PREVENTION ACT, OWNERS OF REGULATED STORAGE TANKS ARE REQUIRED TO REGISTER THEIR TANKS WITH THE DEPARTMENT AND TO PAY A REGISTRATION FEE.

STATE USE ONLY

DATE RECEIVED:

DEC 21 1989

AMOUNT RECEIVED:

\$50.00

INSTRUCTIONS

Please type or print in ink all items except "Signature" in Section V. This form is to be completed for each FACILITY which has regulated storage tanks. If there are more than 10 underground or aboveground tanks, photocopy the reverse side of this form, and staple continuation sheets to this form.

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Section IV. Type of Facility - Mark the appropriate box, if applicable.

Section V. Description of Storage Tanks - This section is for recording information about each regulated storage tank at the facility. Information for aboveground tanks is to be recorded in Part A. Information for underground tanks is to be recorded in Part B.

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2. Status - Indicate whether the tank is currently in use, temporarily out of use, or permanently out of use. Permanently out of use means properly closed in place with an inert solid material. Do not include tanks which have been removed.

3. Date of Installation - Specify the month and year the tank was completely installed. For instance, "0190", for January, 1990. If unknown, write "0000".

4. Capacity - Specify the total design or maximum capacity of the tank in GALLONS. If unknown, write "unknown".

5. Substance Currently or Last Stored - Indicate the substance(s), currently or last stored. If a hazardous substance, please indicate CERCLA Name and CAS Number. If Other is indicated, please specify.

6. Tank Has Been Issued Fire Safety Approval or Permit - Indicate whether the tank has been approved or permitted by the Pennsylvania State Police, Fire Marshal Division; or local agency under their jurisdiction for fire safety.

7. Registration Fee - Determine registration fee due PER TANK as indicated below. A registration fee is NOT required for tanks permanently out of use.

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Section VI. Certification - This section is to be completed by the OWNER. Please type or print the name and official title of the OWNER. The OWNER must also sign and record the date the application was examined.

Section VII. Nameplate Information - Complete this section for each aboveground tank greater than 5,000 gallon capacity. Use the same Tank Registration Number as identified in Section VI.

PLEASE SEND COMPLETED ORIGINAL FORM AND CHECK TO:

PA Department of Environmental Resources
Bureau of Water Quality Management
Registration of Storage Tanks

(and the appropriate address below, depending on where your FACILITY is located)

1875 New Hope Street
Norristown, PA 19401

Counties

Berks, Bucks, Chester, Delaware,
Lehigh, Montgomery, Northampton,
Philadelphia,

90 East Union Street -
2nd Floor
Wilkes-Barre, PA 18701

Counties

Carbon, Lackawanna, Luzerne,
Monroe, Pike, Schuylkill,
Susquehanna, Wayne, Wyoming,

One Ararat Blvd.
Harrisburg, PA 17110

Counties

Adams, Bedford, Blair, Cumberland,
Dauphin, Franklin, Fulton,
Huntingdon, Juniata, Lancaster,
Lebanon, Mifflin, Perry, York

200 Pine Street
Williamsport, PA 17701

Counties

Bradford, Cameron, Centre, Clinton,
Clearfield, Columbia, Lycoming,
Montour, Northumberland, Potter,
Snyder, Sullivan, Tioga, Union

Highland Bldg. - 6th Floor
121 South Highland Mall
Pittsburgh, PA 15206

Counties

Allegheny, Armstrong, Beaver,
Cambria, Fayette, Greene, Indiana,
Somerset, Washington,
Westmoreland

1012 Water Street
Meadville, PA 16335

Counties

Butler, Clarion, Crawford, Elk, Erie,
Forest, Jefferson, Lawrence,
McKean, Mercer, Venango, Warren

I. OWNER INFORMATION

Owner Name Ferranti International Defense Systems, Inc.

Tax Identification No. 23-1742243

Mailing Address P.O. Box 3025

City Lancaster State PA Zip 17604-3025

County Lancaster Phone No. (717) 285-7151

II. TYPE OF OWNER (Mark only one)

- ☐ Federal Government ☒ Corporate
☐ State Government ☐ Private
☐ Local Government

III. FACILITY INFORMATION

Facility Name Ferranti International Defense Systems, Inc.

Facility Identification No. 3-6 60431

Street Address (P.O. Box not acceptable) _____

3725 Electronics Way

City Mountville State PA Zip 17554

County Lancaster Township West Hempfield

IV. TYPE OF FACILITY (Mark only one, if applicable)

- ☐ Farm
☐ Municipal
☐ Residential

3-660431

Facility Name Perant International Systems, Inc

V. DESCRIPTION OF STORAGE TANKS (Complete for each regulated storage tank at this location)

A. ABOVEGROUND TANKS

[illegible]**TOTAL ABOVEGROUND TANK FEE (A)**

0

B. UNDERGROUND TANKS

[illegible]

TOTAL UNDERGROUND TANK FEE (B)

50.00

50

TOTAL ABOVEGROUND & UNDERGROUND TANK FEE (A + B)

50.00

50

KEY FOR COMPLETION OF SECTION V.

Status

Substance Currently or Last Stored

Fire Safety Permit

C Currently in Use
T Temporarily Out of Use
P Permanently Out of Use

A	Gasoline
B	Diesel
C	Gasohol
D	Kerosene
E	Heating Oil
F	New Motor Oil

G	Used Motor Oil
H	Aviation
I	Hazardous Substance
J	Other
K	Unknown
L	Mixture

Y	Yes
N	No

VI. CERTIFICATION (Read and Sign after completing all sections)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. This registration is conditioned upon compliance with provisions of the Storage Tank and Spill Prevention Act, with any regulations and orders issued pursuant to this Act, and with the requirements for obtaining a permit required under this Act.

Name and Official Title of Owner	
Ferranti International Defense Systems, Inc.	James F. Hughes Secretary

Signature

Robert F. Wagner

Date Signed _____

12/14/89